

BID FORM

BID TO: STATE OF TENNESSEE
For the Project Titled:

A. The Bidder acknowledges in submitting this bid that:

1. Bidder has received, read, and understands the Bidding Documents, has visited the site and become familiar with local conditions under which work is to be performed, has correlated observations with requirements of Bidding Documents, and makes this bid in accordance therewith.
2. Information Available to Bidders, identified in 00300 series documents in the Bidding Requirements, were prepared solely for Designer's use in design of this Work and have not been relied upon in the preparation of this bid. The use and interpretation of such information for any purposes is entirely the responsibility of the using party.
3. Contractors and Subcontractors that have been disqualified from participating in State Building Commission projects have not been included in this bid, and will not be allowed to perform work under the contract that may result.
4. The required Bid Security, in the amount of five percent (5%) of the total amount bid, is attached hereto.
5. Failure to complete Bid Form, provide required attachments, or comply otherwise with the Instructions to Bidders, may be cause for rejection of bid.
6. The person who signs this bid on behalf of the Bidder is required to be legally empowered to bind the Bidder to a Contract.
7. This Bidder's status, as required by State Building Commission Policy and Procedure paragraph 5.02, is:

_____ The Bidder and/or any of the Bidder's employees, agents, independent
(True or False) contractors and/or proposed subcontractors have been convicted of, pled guilty to, or pled no lo contendere to any contract crime involving a public contract.

8. This Bidder's status, as required by State Building Commission Policy and Procedure paragraph 5.03, is:

(This information is for reporting purposes only, and is not a factor in the evaluation of bids)

_____ The Bidder is certified as a "Disadvantaged or Minority -Owned Business".
(Yes or No) If "Yes", then check the applicable:

- ☐ Minority Man Business Enterprise
☐ Minority Woman Business Enterprise
☐ Woman Business Enterprise
☐ Handicapped/Disabled Business Enterprise

If Minority, check Classification:

- ☐ Native American
☐ Asian Pacific American
☐ Asian Indian American
☐ African American
☐ Hispanic American
☐ Other _____

Name of Certifying Agency: _____

9. This Bidder has received the following addenda:

Addendum No. _____ dated _____	Addendum No. _____ dated _____
Addendum No. _____ dated _____	Addendum No. _____ dated _____
Addendum No. _____ dated _____	Addendum No. _____ dated _____

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BID FORM continued,
for the Project titled:

B. This Bidder agrees to:

1. Honor this bid for a period of forty-five (45) days following the date of the scheduled opening of bids.
2. Enter into and execute a contract, if presented on the basis of this bid, and furnish certificate(s) of insurance, bonds, and other documents related to the contract as required by the Bidding Documents.

If 3-Year Roof Bond is included in the Work, fill in required bond amount below – either a dollar amount or percent of bid amount – whichever is appropriate; otherwise fill in with “Not Applicable”.)

3. If required by the Bidding Documents, furnish Three Year Roof Bond in the amount of:

4. Accomplish the Work in accordance with the Contract Documents.

5. Achieve Substantial Completion of the Work in accordance with the number of calendar days Contract Time set forth, allotted from and including the date stipulated in the Notice to Proceed; and, accept the conditions for Liquidated Damages in the amount set forth per calendar day.

Phase	Commencement	Contract Time	Liq. Damages
All	Notice to Proceed for all Work	Days	\$ Per Day

(Choose No. 5 above for single-phase work, or No. 5 below for multiple-phase work, and then delete the one not chosen.)

5. Achieve Substantial Completion of the Work and each Phase thereof in accordance with the number of calendar days Contract Time allotted each, from and including the Commencement of each; and accept the conditions for Liquidated Damages in the amount set forth for each, wholly and severally for the Work and each Phase:

Phase	Commencement	Contract Time	Liq. Damages
All	Notice to Proceed for all Work	Days	\$ Per Day
		Days	\$ Per Day
		Days	\$ Per Day
		Days	\$ Per Day

(If alternates are included, use the following to indicate their effects on Time and LDs, whether additive or deductive; otherwise delete.)

And, accept amendment of Contract Time applicable to each Alternate included in the Work

Phase	Alternate	Contract Time	Liq. Damages
	Alternate No. 1	Add Days	Add \$ Per Day
		Deduct Days	\$ Per Day
		Days	\$ Per Day

6. Complete the Work of the Base Bid for this project for the lump sum of:

Base Bid:

_____ And _____ / 100ths Dollars
(Amount shown in both words and figures) \$ _____

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BID FORM continued,
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(If alternates are included & single-phase work, edit the following; otherwise delete.)

7. Include work of the following alternates as specified (See Section 01230) for the additional amounts listed:

Alternate 1:

_____ And _____ / 100ths Dollars
(Amount shown in both words and figures) \$ _____

Alternate 2:

_____ And _____ / 100ths Dollars
(Amount shown in both words and figures) \$ _____

Alternate 3:

_____ And _____ / 100ths Dollars
(Amount shown in both words and figures) \$ _____

(If unit prices are included, edit the following; otherwise delete.)

8. Propose the following Unit Prices, and include the total calculated value (i.e., the Base Quantity indicated in Section 01271 multiplied by proposed Unit Price) of each Unit Price in the bid amounts above, and agree to their use in the construction contract, if accepted by Owner:

Item	Description (See Section 01271)	Unit Price	Unit
1.		\$ _____	per
2.		\$ _____	per
3.		\$ _____	per
4.		\$ _____	per
5.		\$ _____	per

This bid submitted by:

Authorized Signature _____ Date _____

Name _____ Title _____

On behalf of:
(Name of Bidder) _____

Federal Employer Identification Number (EIN) _____

Address _____
(Street & Mailing Address) _____

Telephone No. _____ Facsimile No. _____

Email _____

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